VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

FOR INSTRUCTIONS, SEE BACK OF FORM DISCLOSURE SUMMARY PAGE	IA ETHICS AND	FORM DR-2	DISCLOSURE
COMMITTEE NAME (Must be same as on Statement of Organization)	HGH DISCLOSURE	(Rev. 07/2004)	REPORT
Trobak For Supervisor 2008		I Eas Office Line O	mhr I
	201 12 PM S: 14	#	
IMPORTANT: Indicate by # type of committee you are reporting for: (1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC	(3)State Party		
1/4 \Cauchy Cantral Committee / #\County Candidate (6 \City Candidate (7)SCN	OOI ROSIG OF CAMEL		
Political Subdivision Candidate (3) County PAC (9) City PAC (10) School Board Subdivision PAC (11) Local Ballot Issue	1 or Other Political	1 -	
CANDIDATE COMMITTEES ONLY:			
I wonder-to-transfer	arty (if applicable)	Late reports are	subject to
Neil Trabak Dams	octol	possible civil ar	
Office Sought District (if	Senate or House)	penalties.	
County Supervisor			
240		_ <i>l</i> m	1Cod
SIGNATURE OF PERSON FILING REPORT	2-792-495	DATE	SIGNED
SIGNATURE OF PERSON FILING REPORT			
BEDORT	FOR (1) ELECTION /(2)	NON-ELECTION	YEAR
	Indicate by #		
(report date)	motoate by # [J	
	Local	Committees, enter	Date of Election
CHECK IF AMENDMENT TO REPORT DATED	1 1 1	mamber 8.	2008
☐ Check if this is final (termination) report and attach Notice of Dissolution	n Form DR-3.	y & Local Committee	es, enter County in
(You must continue to file reports until a DR-3 is filed.)	William	y & Local Committe Election is held	ARROLL
			· · · · · · · · · · · · · · · · · · ·
STATEMENT OF CAS	H ON HAND		
CASH ON HAND at the beginning of the reporting period. (Total of all fun	ds held by the		
committee. This amount MUST be the same as the cash on han of the last reporting period or must be zero if this is first report file		s 451	. 09
	Maj service		
ADD TOTAL MONEY TAKEN IN THIS PERIOD Schedule A: Cash Contributions total (Attach Schedule A) (*also	egg in kind helaw	450	T- 98
Schedule A: Cash Commountains total (Attach Schedule A) (and	SOC INTRICA DEMANA		
Schedule F: Loans Received total (Attach Schedule F)			
Schedule H: Total Sales of Campaign Property (Attach Schedule			
(Schedule Happlies to Candidates' Committees Onl	W CIED TOTAL		f
	3UD-1UIAL	\$ 901	3.09
SUBTRACT TOTAL MONEY SPENT THIS PERIOD		L	1.43
Schedule B: Expenditures total (Attach Schedule B) (**also see			1.74
Schedule F: Loan Repayments total (Attach Schedule F)			
CASH ON HAND at the end of this reporting period (if final report balance be zero) (Attach DR-3)	must	. 84	4.47
pę zeroj (Anach UK-3)	***************************************		

*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)	>+	\$	
**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)			20 · 🕰
CANDIDATE COMMITTEES ONLY:		,	[57]
CONSULTANT BREAKDOWN (Schedule G Attached?)		٧ ليا	ES LX NO

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAMI	(Must be sam	e as on State	ement of Organization	ın)
Troba	ek S.	65 Su	PRIVISOR	-

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
	CK THIS BOX IF NDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), lowa Code, prohibits the use of Information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (If applicable) AND PAC CHECK	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (If applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
9-11-08	NUMBER ID#	Dr Rip Christianson		\$50.00	
-11-08	CK#	DI WITH THE INCHES			
10-2-08	GK#	Unitimized contributions		40 5.00	
	ID#				
	CK#				
	ID#				
	CK#				L
	1D#				
	GK#	İ			
	ID#				
	CK#				
	ID#				
	CK#				<u> </u>
	ID#				
	CK#				<u> </u>
	ID#				
	CK#]
	ID#				
	CK#				
			SUB-TOTAL		T

TOTAL (if last page of this schedule)

(for Schedule A)

^{*} Disclosure lew requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

FOR INSTRUCTIONS, SEE BACK OF FORM

T		7	
Parties.	13 (2.1)	;	SC

HEDULE B

(Rev. 07/03)

MONETARY EXPENDITURES

EXPENDITURES - MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBER'S IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

L CHECK THIS BOX IF **AMENDING FORM**

COMMITTE		same as on Statement of Organization)		
Tra	bak Ro	or Supervisor		
DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
2 009 2 70	ID# CK# 502	Bankers Advertleing Co. PO Box 2689 52294 Town City, Jona	advartisib	541.42
	ID# CK#			
	ID#		· ·	
	ID#			
	ID#			
	ID#			
	CK#			
	ID#			
	CK#		SUB-TOTAL	\$
			TOTAL (If last page of this schedule)	\$4142

THIS BOY APPLIES TO	CANDIDATES' COM	MITTEES	ONLY

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lows Code 68A.402(3)(I).)

Page	ŧ	of	<u> </u>

	(for Schedule F)	Раде		hibutor is	s). If sumeme of contril r "not applicable" in the	consangunity (Diood relatives) and affinity (relatives by marriage). If sumeme of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column when it applies.	consenguinty (the same as ca relationship col
•				Nee of	elationship of any relationship to the state of the state	*Disclosure law requires candidate committees to disclose the relationship of any relative mattry a contribution to the committee. Relationship must be shown to the third degree of	Disclosure law
Othan Oc	Fľ	From Schedule E - TOTAL LOANS FORGIVEN TOTAL OUTSTANDING LOANS END OF REPORT PERIOD	TOTAL O				
	RT 11) \$	TOTAL CASH REPAYMENTS (PART II)	:		*	TOTAL (PART I)	
			Harris II				
			·				
~							
AMOUNT REPAID	RELATIONSHIP TO CANDIDATE* (If Applicable)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	DATE PAID (MIMDD/YR)	AMOUNT OF LOAN	RELATIONSHIP TO CANDIDATE (If Applicable*)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, # Applicable)	DATE RECEIVED (MM/DD/YR)
	REPORTING PERIOD - In-land Confibutions.)	PART # - MONETARY LOAN REPAYMENTS MADE THIS REPORTING PERIOD (Loans forgiven must be reported on Schedule E — in-land Conhibutions.)	PART N - NO		PERIOD m if a third party is %.)	MONETARY LOANS RECEIVED THIS REPORTING PERIOD (Original source of Loan, such as a bank, must be shown if a fluid party is involved, include loans from candidate's personal funds.)	PART I - MONE (Origin byvolvo
BOX IF	AMENDING FORM	,	=	Committee accou	ich is deposited in the com	tule reports money learned to the	NOTE: This sch
LOANS RECEIVED & REPAID	(Rev. 97/03) REC	Section 1			stion)	COMMITTEE NAME (Must be some on Statement of Organization)	COMMITTEE NA
	SCHEDULE					FOR INSTRUCTIONS, SEE BACK OF FORM	FOR INSTRUCT